

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.  
10/006070  
APPLICANT(S)

FILE NO DATE

CLAIMS						
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
IND	DEP	IND	DEP	IND	DEP	
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TOTAL IND.	9	17				
TOTAL DEP.	36	23				
TOTAL CLAIMS	45	40				

  

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TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					